

Please type a plus sign (+) inside this box

## Regid PCT/PTO 26 MAY 2005

10/533782

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **PATRADE** Attorney Docket Number **DECLARATION FOR UTILITY OR** Jørgen Rasmussen First Named Inventor DESIGN PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number 782, 533 Filing Date 05/04/2005 Declaration □ Declaration OR Submitted after Initial Submitted Group Art Unit with Initial Filing (surcharge (37 CFR 1.16 (e)) Filing **Examiner Name** required)

As a below named inventor, I hereby declare that:									
My residence, mailing address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Device for Dispension									
(Title of the Invention)									
ine specification of which	the specification of which								
was filed on (MM/DD/YYYY) 05/04/2005 as United States Application Number or PCT International									
Application Number 10/533 783 (if applicable).									
10/55	Application Number 10/533,783 and was amended on (MM/DD/YYYY)								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO					
PA 2002 01694 PA 2002 01695 PA 2003 00429 PA 2003 01053	Denmark Denmark Denmark Denmark	11/04/2002 11/04/2002 03/20/2003 07/11/2003	0000						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number(s)		e (MIW/DD/YYYY)							
			Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						
			PTO/SB/	J2B attached hereto.					

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**POWER OF ATTORNEY OR** 

I am the:

Name

Signature

Applicant/Inventor.

Bang

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

& Olufsen Medicom a/s

Rec 1 7 5 3 3 7 8 2 MAY 2005

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Jørgen Rasmussen

10/533,782

05/04/2005

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

**Application Number** 

First Named Inventor

Filing Date

## AUTHORIZATION OF AGENT **Group Art Unit Examiner Name** MAY 2 6 2005 **PATRADE Attorney Docket Number** PADEMA I hereby appoint: Place Customer **Practitioners at Customer Number** Number Bar Code Label here Practitioner(s) named below: Name Registration Number James C. Wray 22.693 Meera P. Narasimhan 40,252 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm.or X James C. Wray Individual Name Address: 1493 Chain Bridge Road Address Suite 300 22101 VA City McLean Zip US Country (703) 448-7397 (703) 442-4800 Telephone Fax

SIGNATURE of Applicant or Assignee of Record

Henrik Kagenow, CEO

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

U.S. Patent and Trademark Office; U.S. Department Off Commence
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

Direct all corr	respondence to:	Customer N or Bar Code				OR X	Correspondence address below		
Name	James C. Wray								
Address	1493 Chain Bridge Road								
Address	Suite 300								
City	McLean	<del></del>			State	VA	22101 ZIP		
Country	US		Telephon		3) 442	-4800	(703) 448-7397 Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wiliful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF S	SOLE OR FIRST INV	/ENTOR :			A petiti	ion has been fil	ed for this unsigned inventor		
Given Name (first and middl	Given Name Jørgen Family Name Rasmussen or Surname								
Inventor's Signature	Jary A	ash.n~					2095-05-03 Date		
Residence: Cit	Struer	DXX		DK State		Denmark Country	Danish Cittzenship		
Mailing Address	:S			-					
Mailing Address	Ydunsvej 6	DK-7	600 S	truer,	Deni	mark			
City Strue	r State DK				ZIP DK-7600		Country Denmark		
NAME OF SE	ECOND INVENTOR	•			A petiti	ion has been file	ed for this unsigned inventor		
Given Name (first and middle	Given Name Søren Family Name Christrup or Surname						istrup		
Inventor's Signature	550		· · · · ·				2005 - 05 - 03 Date		
Residence: City	Struer	s ok	۷	State	DK	Denmark Country	Danish Citizenship		
Kirsebærhaven 5, DK-7600 Struer, Denmark Mailing Address									
Mailing Address	3								
City Struer	State DK				DK-7600 Country Denmark		Country Denmark		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.									

U.S.Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner. Jørgen Rasmussen and Søren Christrup 10/533,782 Application No./Patent No.: Filed/Issue Date: 05/04/2005 Entitled: Device for dispension Bang & Olufsen Medicom a/s corporation (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) states that it is: 1. A the assignee of the entire right, title, and interest; or 2.  $\square$  an assignee of less than the entire right, title and interest. The extent (by, percentage) of its ownership interest is in the patent application/patent identified above by virtue of either: A. [X] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached. OR B. [ ] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: 1. From: The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame\_\_\_\_\_, or for which a copy thereof is attached. 2. From: The document was recorded in the United States Patent and Trademark Office at \_\_\_\_, or for which a copy thereof is attached. 3. From:\_ The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame\_\_\_\_\_, or for which a copy thereof is attached. [ ] Additional documents in the chain of title are listed on a supplemental sheet. [ ] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. 26-04-2005 Bang & Olufsen Medicom a/s vped of printed name Henrik Kagenow signature Title

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.